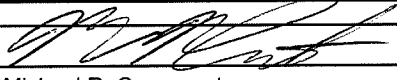


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete if Known Application Number 10/715,476-Conf. #3741 Filing Date November 19, 2003 First Named Inventor Makoto SHIZUKUISHI Examiner Name A. R. Hsu Art Unit 2622 Attorney Docket No. 0649-0923P	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 940.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																	
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)										
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)											
Utility	330	165	540	270	220	110											
Design	220	110	100	50	140	70											
Plant	220	110	330	165	170	85											
Reissue	330	165	540	270	650	325											
Provisional	220	110	0	0	0	0											
2. EXCESS CLAIM FEES																	
							Small Entity Fee (\$)										
Fee Description							Fee (\$)										
Each claim over 20 (including Reissues)							52										
Each independent claim over 3 (including Reissues)							220										
Multiple dependent claims							390										
<table border="0"> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Multiple Dependent Claims</td> </tr> <tr> <td>_____ - or HP = _____</td> <td>x _____</td> <td>= _____</td> <td></td> <td>Fee (\$) Fee Paid (\$)</td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	_____ - or HP = _____	x _____	= _____		Fee (\$) Fee Paid (\$)	
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims													
_____ - or HP = _____	x _____	= _____		Fee (\$) Fee Paid (\$)													
HP = highest number of total claims paid for, if greater than 20.																	
<table border="0"> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>_____ - or HP = _____</td> <td>x _____</td> <td>= _____</td> <td></td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____ - or HP = _____	x _____	= _____				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)														
_____ - or HP = _____	x _____	= _____															
HP = highest number of independent claims paid for, if greater than 3.																	
3. APPLICATION SIZE FEE																	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
<table border="0"> <tr> <td>Total Sheets</td> <td>Extra Sheets</td> <td>Number of each additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>_____ - 100 = _____</td> <td>/50 = _____</td> <td>(round up to a whole number) x _____</td> <td>= _____</td> <td></td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____	
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)													
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____														
4. OTHER FEE(S)							Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)																	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							810.00										
1251 Extension for response within first month							130.00										

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	39,491
Name (Print/Type)	Michael R. Cammarata	Telephone	(703) 205-8000
		Date	July 8, 2009